

State of Rhode Island
Department of Administration

INTER-OFFICE MEMORANDUM

Office of Accounts and Control

TO: Chief Payroll Officers
Departments and Agencies

DATE: February 12, 2001

FROM: Robert A. Poll, State Controller

SUBJECT: FORMS TO REQUEST W-2 DUPLICATES

Attached please find a W-2 request form to order duplicates for the year 2000. You can photocopy this form on plain white paper. All requests should be forward to Accounts and Control, Attn: Administrative Section.

/hh
CPO:01-07
Attachment

SOCIAL SECURITY NUMBER

STATE OF RHODE ISLAND
OFFICE OF ACCOUNTS AND CONTROL

REQUEST FOR DUPLICATE W-2

CALENDAR YEAR 2000

NAME: _____

MAILING ADDRESS: _____

DAYTIME PHONE NO. _____

TO BE MAILED TO EMPLOYEE _____ TO BE PICKED UP _____

TO BE SENT TO AGENCY/DEPARTMENT _____

(Fill in Agency/Department Name)

FOR CONTROLLER'S OFFICE USE ONLY

DATE REQUEST RECEIVED	INITIALS OF RECEIVER	DATE DUPLICATE W-2 MAILED	INITIALS OF SENDER